



## Studies in the News for



## Children and Families Commission

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## **Introduction to Studies in the News**

Studies in the News: Children and Family Supplement is a service provided to the First 5 California Children and Families Commission by the California State Library. The service features weekly lists of current articles focusing on Children and Family policy. Prior lists can be viewed from the California State Library's Web site at <http://www.library.ca.gov/sitn/ccfc/>.

### **How to Obtain Materials Listed in SITN:**

- When available on the Internet, the URL for the full-text of each item is provided.
- California State Employees may contact the State Information & Reference Center (916-654-0206; [cslsirc@library.ca.gov](mailto:cslsirc@library.ca.gov)).
- All other interested individuals should contact their local library - the items may be available there, or may be borrowed by your local library on your behalf.

The following studies are currently on hand:

## **IMPROVED CHILD DEVELOPMENT**

**“How Swede It Is: Are Practical (and Affordable) Swedish Preschools Better?” By Bronwyn Griffith. IN: Edutopia Magazine (February 2008) 4 p.**

[“In Sweden, where compulsory education doesn't start until age seven, the national preschool curriculum doesn't list quantifiable requirements; instead, it places an emphasis on socialization.” Edutopia News (February 13, 2008.)]

Full text at: <http://www.edutopia.org/global-education-sweden-preschool>

**Elevating the Field Using NAEYC Early Childhood Program Accreditation to Support and Reach Higher Quality in Early Childhood Programs. By Davida McDonald. NAEYC Public Policy Report. (National Association for the Education of Young Children, Washington, DC) December 2007. 18 p.**

[“This National Association for the Education of Young Children (NAEYC) report highlights strategies that states are using to improve the quality of their early care and

education systems, with linkages to NAEYC accreditation.” CFK Weekly (February 20, 2008.)]

Full text at: <http://www.naeyc.org/policy/state/pdf/NAEYCpubpolReport.pdf>

**How Maternal, Family and Cumulative Risk Affect Absenteeism in Early Schooling: Facts for Policymakers. (National Center for Children in Poverty, New York, New York) February 2008. 4 p.**

[“Maternal and family risks are associated with greater absenteeism and the cumulative exposure to risk best predicts chronic absenteeism in early schooling.... The maternal and family risks most commonly encountered by U.S. kindergartners include: living with a single mother (19 percent); below the Federal Poverty Level (18 percent); in a large family - four or more children at home (14 percent); or with a mother who has not completed high school (12 percent). The least frequent risks were being born to a teenage mother (4 percent) or living with an unemployed mother (4.5 percent). These risks are more persistent among the most vulnerable children - those who were poor, racial/ethnic minorities, or suffered from poor health. A child’s risk status is directly related to family income; the poorer the children, the more they experience any of the risks tracked.”]

Full text at: [http://www.nccp.org/publications/pdf/text\\_802.pdf](http://www.nccp.org/publications/pdf/text_802.pdf)

**The Influence of Maternal and Family Risk on Chronic Absenteeism in Early Schooling. By Maria José Romero and Young-Sun Lee. (National Center for Children in Poverty, New York, New York) January 2008. 16 p.**

[“This report shows that maternal and family risks are associated with greater absenteeism and that the cumulative exposure to risk best predicts chronic absenteeism in early schooling. Kindergartners in contact with three or more risks missed, on average, three or more days than their peers not facing any risks.... This report also reveals that it is the most vulnerable children - that is, those who are poor or racial/ethnic minorities or suffer from poor health - who have the greatest exposure to cumulative risk.”]

Full text at: [http://www.nccp.org/publications/pdf/text\\_792.pdf](http://www.nccp.org/publications/pdf/text_792.pdf)

**Tangible Steps toward Tomorrow: New Designs for Early Education, Ages 0-8. By the W.K. Kellogg Foundation and IDEO. (The Foundation, Battle Creek, Michigan) October 2007. 132 p.**

[“Seeking a fresh approach and ‘out-of-the-box’ ideas on school readiness, the W.K. Kellogg Foundation (WKKF) created a unique partnership. They engaged the brainpower of the design firm IDEO to help them navigate a complex challenge: envision tangible steps toward transforming early education to ensure success for the next generation.

Ranked by global business leaders as one of the world's most innovative companies, IDEO approaches its work with the end user in mind. In turn, the IDEO team immersed itself in the world of early childhood education, conducting observations in classrooms and the homes of parents as well as connecting to experts within and outside of the WKKF network. They also drew on the ideas and extensive expertise of the directors involved in WKKF's SPARK initiative. SPARK is designed to unite communities so that all children can be successful before and after they enter school. The result is a set of solutions outlined in... Tangible Steps Toward Tomorrow.... 'The solutions focus around three areas: parents, teachers and schools. The rationale for this is that these are the three major influences on the child's education, and that they are also discrete and observable groupings, as opposed to broader social or political issues,' the report reads." Ascribe Newswire (February 8, 2008.)]

Full text at: (Note: this publication takes a few minutes to load.)

[http://www.wkkf.org/DesktopModules/WKF.00\\_DmaSupport/ViewDoc.aspx?LanguageID=0&CID=168&ListID=28&ItemID=5000407&fld=PDFFile](http://www.wkkf.org/DesktopModules/WKF.00_DmaSupport/ViewDoc.aspx?LanguageID=0&CID=168&ListID=28&ItemID=5000407&fld=PDFFile)

## **IMPROVED FAMILY FUNCTIONING**

**Family Strengthening Writ Large: On Becoming a Nation that Promotes Strong Families and Successful Youth. By the Family Strengthening Policy Center. Policy Brief. No. 24. (National Human Services Assembly, Washington, DC) December 2007. 26 p.**

[“Most children raised in families that have three fundamentals grow up to become caring, contributing, and successful adults. The fundamentals of these strong and supportive families are: Loving, nurturing relationships; Financial stability (i.e., family economic success); Positive connections to people, organizations, and opportunities....” This brief explores “these fundamentals in depth: why they are important and what policies, programs, and practices make a difference. The brief then explores the role of cultural and systemic change in creating the conditions that will actively support families and parent/caregivers in raising children. It concludes with recommendations for the family-strengthening field, policy makers, and employers.”]

Full text at: <http://www.nassembly.org/fspc/documents/revbrief24.pdf>

**Broken Bonds: Understanding and Addressing the Needs of Children with Incarcerated Parents. By Nancy G. La Vigne and others. Research Report. (The Urban Institute, Justice Policy Center, Washington, DC) February 2008. 21 p.**

[“Over 1.5 million children in this country currently have one or both of their parents incarcerated. In addition to the trauma of this loss, these children face tremendous uncertainty in their living arrangements, relationships with loved ones, and family financial stability. Short-term coping responses and heavy stigma are common, both of which may lead to long-term emotional and behavioral challenges. This report reviews

the current research on children with incarcerated parents and offers recommendations on how to reduce the negative impact of parental incarceration, with particular attention to the role of supportive relationships with the incarcerated parent and other adults.” The Urban Institute.]

Full text at: [http://www.urban.org/UploadedPDF/411616\\_incarcerated\\_parents.pdf](http://www.urban.org/UploadedPDF/411616_incarcerated_parents.pdf)

**Broken Bonds: Understanding and Addressing the Needs of Children with Incarcerated Mothers. Thursday’s Child policy forum. (Chapin Hall Center for Children, University of Chicago, and the Urban Institute, Washington, DC) February 14, 2008. Podcast.**

[“As the population of incarcerated women grows, so does the number of children whose mothers are absent from their lives. Current estimates indicate that on any given day, more than 150,000 children have a mother in prison, yet far too little is known about these children and their needs and experiences. What are their home environments like before, during, and after incarceration? If they are in foster care, when did they enter the system, and what are their prospects for family stability? What are the barriers to healthy mother-child relationships? What emotional and behavioral challenges do these children face? What can charitable organizations, service providers, and policymakers do to address those challenges? The panel seeks to cast a bright light on this often invisible population of children.” Urban Institute Update (February 12, 2008.)]

Podcast at: <http://www.urban.org/Pressroom/thursdayschild/february2008.cfm>

## **IMPROVED HEALTH**

**Replacing Mother - Imitating Human Breast Milk in the Laboratory. By Charlotte Vallaeys and others. (Cornucopia Institute, Cornucopia, Wisconsin) January 2008. 66 p.**

[This report “details research questioning the alleged benefits of adding ‘novel’ omega-3 and omega-6 fatty acids, produced in laboratories and extracted from algae and fungus, into infant formulas. The report presents disturbing research indicating that the new additives placed in infant formula are seriously endangering the health of some formula-fed newborns and toddlers. Aggressive marketing campaigns by some infant formula manufacturers appear to have encouraged new mothers to give up nursing and switch to use of the questionable infant formula products.” Cornucopia Institute.]

Executive Summary: 7 p.

[http://www.cornucopia.org/DHA/DHA\\_Executive\\_Summary\\_web.pdf](http://www.cornucopia.org/DHA/DHA_Executive_Summary_web.pdf)

Full text at:

[http://cornucopia.org/DHA/DHA\\_FullReport.pdf](http://cornucopia.org/DHA/DHA_FullReport.pdf)

Podcast on report: [Celsias Podcast - runtime 17:31 minutes.]

“Podcast Interview: Corporate Biotech - Poisoning our Babies?”

<http://www.celsias.com/2008/01/31/are-risks-in-novel-oils-in-infant-formula-and-organic-foods-putting-consumers-at-risk/>

**“Marketing Infant Formula through Hospitals: the Impact of Commercial Hospital Discharge Packs on Breastfeeding.” By Kenneth D. Rosenberg and others. IN: American Journal of Public Health, vol. 98, no. 2 (February 2008) pp. 290-295.**

[“Commercial hospital discharge packs are commonly given to new mothers at the time of newborn hospital discharge. We evaluated the relationship between exclusive breastfeeding and the receipt of commercial hospital discharge packs in a population-based sample of Oregon women who initiated breastfeeding before newborn hospital discharge.... Among women who had initiated breastfeeding, 66.8% reported having received commercial hospital discharge packs. We found that women who received these packs were more likely to exclusively breastfeed for fewer than 10 weeks than were women who had not received the packs.... Conclusions. Commercial hospital discharge packs are one of several factors that influence breastfeeding duration and exclusivity. The distribution of these packs to new mothers at hospitals is part of a longstanding marketing campaign by infant formula manufacturers and implies hospital and staff endorsement of infant formula. Commercial hospital discharge pack distribution should be reconsidered in light of its negative impact on exclusive breastfeeding.” NOTE: Marketing Infant Formula... is available for loan.]

**Early Childhood Health Problems and Prevention Strategies: Costs and Benefits. By the Partnership for America’s Economic Success. Issue Brief. No. 3. (The Partnership, Washington, DC) [2008.] 6 p.**

[“Do investments in children’s health programs reap benefits beyond the costs? In this paper, Dr. Bernard Guyer and his colleagues at Johns Hopkins University examine the costs of four specific types of young children’s health problems - exposure to tobacco smoke, unintentional injury, mental health problems, and obesity - and review over 300 studies of a range of interventions to address them. While results vary for each health issue, the bottom line is that investing in early childhood health makes economic sense.”]

Full text at:

[http://www.partnershipforsuccess.org/uploads/200801\\_HopkinsBriefFINAL.pdf](http://www.partnershipforsuccess.org/uploads/200801_HopkinsBriefFINAL.pdf)

**Investments to Promote Children’s Health: A Systematic Literature Review and Economic Analysis of Interventions in the Preschool Period. By Bernard Guyer and others, John Hopkins Bloomberg School of Public Health. (Partnership for America’s Economic Success, Washington, DC) January 2008. 135 p.**

[“The present study examines both the short- and long-term economic and health impact of health promotion and disease preventive interventions on four selected health problems of particular concern to young children (prenatal to age five) - exposure to tobacco use, obesity, unintentional injury, and mental health problems. The results show compelling evidence of the long-term health impact and societal economic burdens of these four problems when manifested in the preschool years. While the evidence on the effectiveness of preventive interventions is uneven, it does show that, from society’s perspective, the benefits outweigh the costs of such interventions. We conclude this review by making the case that adopting an - ‘investment’ approach to children’s health policy offers new opportunities to enhance the health and economic well-being of the entire U.S. population.”]

Full text at:

[http://www.partnershipforsuccess.org/uploads/200801\\_HopkinsPaperFINAL.pdf](http://www.partnershipforsuccess.org/uploads/200801_HopkinsPaperFINAL.pdf)

**A Universal Checklist for Identifying Infants and Toddlers Eligible for Early Intervention. By Carl J. Dunst and others. TRACE Practice Guide, vol. 2, no. 1 (November 2007) 6 p.**

[“This TRACE Practice Guide includes a description of the development and use of a universal checklist for identifying infants and toddlers that may be eligible for early intervention.... The checklist was specifically developed to facilitate and streamline the identification of potentially eligible children without the need to administer screening or developmental tests and was designed to be used by primary referral sources to make referrals to early intervention. Individual with Disabilities Education Act (IDEA) Part C early intervention programs and Part B (619) preschool special education programs are required to develop methods and procedures for promoting referrals of infants, toddlers, and preschoolers with identified disabilities or developmental delays by primary referral sources. Primary referral sources include, but are not limited to, physicians and other health care providers, hospitals, information and referral programs, child care programs and family child care providers, public health departments and centers, social services agencies, developmental evaluation centers, and other early childhood professional and practitioners....”]

Full text at: [http://www.tracecenter.info/practiceguides/practiceguides\\_vol2\\_no1.pdf](http://www.tracecenter.info/practiceguides/practiceguides_vol2_no1.pdf)

**Pediatric Dentistry: How Can Dental Care for Low-Income Children Be Improved? By the George Washington University School of Public Health and Health Services. (The University, Washington, DC) January 2008. 11 p.**

[“A ‘silent epidemic’ of dental and other oral diseases disproportionately affects the nation’s most vulnerable children. This paper describes the causes and consequences of the problem, and the many strategies available to address it. Unmet dental needs can



cause severe infection, acute pain, and lifelong illnesses, and have long-term consequences for development, affecting school performance, self-esteem, and nutrition. Occasionally, dental disease can turn deadly. Twenty million children have no dental insurance at all. While Medicaid requires that dental benefits be covered for all enrolled children, most dentists do not accept this insurance, and caregivers often experience great difficulty accessing treatment for Medicaid-insured children. Strategies for increasing access to dental care include increasing Medicaid reimbursement rates to dentists and streamlining program administration; expanding the dental safety net through SCHIP, health centers or other providers; broadening the provider network; enhancing consumer and provider education; and replicating the many state-level models that have been developed.”]

[http://www.gwumc.edu/sphhs/about/rapidresponse/download/Rapid6\\_Dental\\_D2.pdf](http://www.gwumc.edu/sphhs/about/rapidresponse/download/Rapid6_Dental_D2.pdf)

**Oral Health Promotion, Prevention, & Treatment Strategies for Head Start Families: Early Findings from the Oral Health Initiative Evaluation. By Patricia Del Grosso and others. Submitted by Mathematica Policy Research, Inc. (Administration for Children and Families, U.S. Department of Health and Human Services, Washington, DC) September 5, 2007.**

[“This implementation evaluation of the Head Start Oral Health Initiative included telephone interviews and the monthly collection of service data. The interim report describes the early implementation experiences of the 52 Head Start Oral Health Initiative (OHI) grantees including service designs and delivery, as well as successes and challenges.” ACF OPRE News (February 14, 2007.)]

Volume I: Final Interim Report: 100 p.

[http://www.acf.hhs.gov/programs/opre/hs/eval\\_oral\\_health/reports/early\\_findings\\_vol1/early\\_findings\\_vol1.pdf](http://www.acf.hhs.gov/programs/opre/hs/eval_oral_health/reports/early_findings_vol1/early_findings_vol1.pdf)

Volume II: Site Profiles: 138 p.

[http://www.acf.hhs.gov/programs/opre/hs/eval\\_oral\\_health/reports/early\\_findings\\_vol2/early\\_findings\\_vol2.pdf](http://www.acf.hhs.gov/programs/opre/hs/eval_oral_health/reports/early_findings_vol2/early_findings_vol2.pdf)

**Challenging Behaviors and the Role of Preschool Education. By Lisa A. McCabe and Ellen C. Frede. Preschool Policy Brief. Issue No. 16. (National Institute for Early Education Research, New Brunswick, New Jersey) December 2007. 12 p.**

[“Is there a rise in challenging behaviors among young children in early care and education? Is preschool a contributing factor or can it provide positive experiences that can reduce the rates of challenging behaviors? What about quality? In this NIEER policy brief, authors Lisa A. McCabe and Ellen C. Frede review the research in order to answer these questions and make recommendations that can lead to better behavioral outcomes.” Natural Resources (February 20, 2008.)]



Full text at: <http://nieer.org/resources/policybriefs/16.pdf>

## **IMPROVED SYSTEMS OF CARE**

**Racial Disparity in the Child Welfare System. Thursday's Child policy forum. (Chapin Hall Center for Children, University of Chicago, and the Urban Institute, Washington, DC) January 10, 2008. Podcast.**

[“During a recent Chapin Hall policy forum, Research Fellow Fred Wulczyn discussed a study that found African-American infants are nearly three times more likely than white infants to be placed in foster care. Child welfare administrators on the panel discussed initiatives in New York City and Washington, D.C. to reverse the tide of racial disparity.” CFK Weekly (February 20, 2008.)]

Podcast at:

<http://www.urban.org/Pressroom/thursdayschild/january2008.cfm>

**Institutional Review Boards (IRBs): What are They, and Why are they Important? By Jacinta Bronte-Tinkew and others. Research-to-Results. No. 2008-09. (Child Trends, Washington, DC) February 2008. 7 p.**

[“Many out-of-school programs conduct evaluations using information from participants, including children, parents, and staff members. Institutional Review Boards (IRBs) protect the privacy, confidentiality and other rights of participants, and also reduce the program provider's risks of complaints, negative publicity, or legal problems. This brief discusses the importance of IRBs and provides guidelines for their use in out-of-school program research.” Child Trends E-Newsletter (February 19, 2008.)]

Full text at:

[http://www.childtrends.org/Files//Child\\_Trends-2008\\_02\\_19\\_Evaluation7IRBs.pdf](http://www.childtrends.org/Files//Child_Trends-2008_02_19_Evaluation7IRBs.pdf)

**How Can I Assess the Quality of my Program? Tools for Out-of-School Time Program Practitioners. By Jordan Kahn and others. Research-to-Results. No. 2008-10. (Child Trends, Washington, DC) February 2008. 8 p.**

[“Numerous program quality assessment tools have been developed that can be used for self-assessment and program improvement. This brief identifies some of the advantages of using these tools and suggests a number of quality assessment tools currently available.” Child Trends E-Newsletter (February 19, 2008.)]

Full text at:

[http://www.childtrends.org/Files//Child\\_Trends-2008\\_02\\_19\\_Eval8ProgramQuality.pdf](http://www.childtrends.org/Files//Child_Trends-2008_02_19_Eval8ProgramQuality.pdf)

### **STUDIES TO COME**

*[The following studies, reports, and documents have not yet arrived. California State Employees may place requests, and copies will be provided when the material arrives. All other interested individuals should contact their local library - the items may be available there, or may be borrowed by your local library on your behalf.]*

### **IMPROVED HEALTH**

**“Ametropia, Preschoolers' Cognitive Abilities, and Effects of Spectacle Correction.”**  
**By Anne-Catherine Roch-Levecq and others. IN: Archives of Ophthalmology, vol. 126, no. 2 (February 2008) pp. 252-258.**

[“Preschoolers with poor vision significantly improved their test scores within six weeks of consistently wearing prescription glasses, a new study shows. ‘It has been theorized that when young children have early vision problems that are undiagnosed and uncorrected, their development and performance in school are impacted,’ Stuart I. Brown, chairman of ophthalmology and director of the Shiley Eye Center University of California, San Diego, School of Medicine, said... ‘This study shows that children with vision impairment do perform below the norm in visual-motor coordination tests, and that they catch up quickly once they are given corrective [lenses].’” HealthDay News (February 13, 2008.) NOTE: Ametropia, Preschoolers’ Cognitive Abilities... will be available for loan.]

### **CONFERENCES AND FUNDING OPPORTUNITIES**

**Kaiser Permanente Cares for Communities Grants. Kaiser Permanente, Oakland, California.**

[“This program supports nonprofit organizations that focus on community and children's health nationally and in California, Colorado, Georgia, Hawaii, Maryland, Virginia, Washington, D.C., Ohio, Oregon and Washington. Requests are accepted throughout the year.” CFK Weekly (February 20, 2008.)]

For more information: <http://xnet.kp.org/communitybenefit/gep/grants.html>

**3rd Young Children Without Homes National Conference. Hosted by Horizons for Homeless Children. April 15-17, 2008. Hynes Convention Center, Boston, Massachusetts.**

[“Hosted by Horizons for Homeless Children, this conference will focus on the issue of child and family homelessness and its effect on young children (0-5); cross-systems training; networking and collaboration; strategies and solutions. Who’s invited? Providers of early care and education services; providers of homeless services; health professionals; public school teachers / administrators; homeless education liaisons; Head Start providers; policymakers; legislators and more!”]

Conference brochure:

<http://www.horizonsforhomelesschildren.org/uploadDocs/Final%20Brochure.pdf>

For more information and to register:

<http://www.horizonsforhomelesschildren.org/Programs-Natl-Conf-2008.asp>